

GEORGIA STATE BOARD OF ACCOUNTANCY

**237 Coliseum Drive
Macon, GA 31217-3858
Phone 478-207-2440**

CONTINUING PROFESSIONAL EDUCATION (CPE) AUDIT REPORT FORM

For the Two-year CPE Reporting Period Beginning January 1, 2006 and Ending December 31, 2007

PLEASE PRINT OR TYPE: Be sure to sign, date and notarize in the space provided. Attach supporting documentation in accordance with Board Rule Chapter 20-11.

NAME _____ **LICENSE #** _____ **YEAR ISSUED** _____

Institute, Organization, or Agency Conducting Program	Title of Program or Description of content	Location of Program	Dates Attended	All Other Subjects	Number of A&A Hours Claimed	Documentation Attached

Total hours claimed		
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Number of hours in 2006	
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Number of hours in 2007	
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Carryover from period ending 12/31/05 (maximum 15-cannot be in A&A)	
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AFFIDAVIT

Sworn to and subscribed before me this _____ day of _____, 200____ .

I certify that the above is true and accurate information and I have attached required documentation.

Signature of Licensed Certified Public Accountant or Foreign Public Accountant

Notary Public _____

Printed/Typed Name of Licensed Certified Public Accountant or Foreign Public Accountant

NOTARY SEAL

Daytime Telephone Number _____

License Number _____

License Issue Date _____

E-Mail Address _____